

U.S. Department of Justice
United States Marshals Service

Case 1:13-cv-06467-RJS Document 1-1 Filed 10/02/13 Page 1 of 1

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF Girleene Reel-Moore	COURT CASE NUMBER 13C V 6467
DEFENDANT Verizon, et al	TYPE OF PROCESS Summons & Complaint

SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Christopher G. Shea	S.D. OF N.Y. 13 DEC 31 PM 2:45	US DISTRICT COURT FILED
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 395 Flatbush Ave, F1R7, BKLYN, NY 11201		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Pro Se Girleene Reel-MOORE 172-10 133rd Ave APT 5G Jamaica, N.Y. 11434		Number of process to be served with this Form - 285
		Number of parties to be served in this case
		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

Signature of Attorney or other Originator requesting service on behalf of: Girleene Reel-Moore	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 347-207-0919	DATE 10-2-13
--	---	---	------------------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process Plc	District of Origin No. 054	District to Serve No. 054	Signature of Authorized USMS Deputy or Clerk	Date 10/8/13
---	-----------------------------	--------------------------------------	-------------------------------------	--	------------------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.		
Address (complete only if different than shown above)	Date of Service 10/5/13	Time 3:00	am pm
Signature of U.S. Marshal or Deputy [Signature]			

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
-------------	---	----------------	---------------	------------------	--------------------------------	------------------

REMARKS: **10/8-M/S ENDEAVOR. 3:00 P.M. 10/5/13 W/NOT RECEIPT AT LOCATION NEED ADDRESS FOR LEGAL DEPT.**
1118 FWD EDNY

13-6467-6